**FEC** FORM 3

## REPORT OF RECEIPTS **AND DISBURSEMENTS**

For An Authorized Committee

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ADDRESS (number and street)  Check if different than previously reported. (ACC)	c/o Arent Fox LLP					لــــا
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2. FEC IDENTIFICATION	NUMBER ▼	CITY		STATE A	ZIP CODE A STATE ▼ DI	STRICT
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4. TYPE OF REPORT (C)  (a) Quarterly Reports:  April 15 Quarterly  July 15 Quarterly  October 15 Quarterly  January 31 Year-  Termination Reports	(b) 12  Report (Q1)  Report (Q2)  terly Report (Q3)  End Report (YE) (c) 30	Primary (1. Convention  lection on  General (3.)	2P)  (12C)  Report for the:	General (1	in the State of	(12R)
5. Covering Period	01 / 01 / 20	15 throug	n 03	/ <mark>31</mark> /	2015	
I certify that I have examined		at of my knowledge ar	d belief it is tr	ue, correct and	d complete.	<del></del>
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